

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

B₁₄ Ruta

RECEIVED

'05 FEB -1 A10:37

STATE OF HARALE STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)				
PART I LOBBYIST				
NAME(Last) Botti	(First) Richard	(Middle) C.	TELEPHONE 808-533-6750	
MAILING ADDRESS (Street) 677 Ala Moana Blvd., Suite 815			FAX 808-599-2606	
(City) Honolulu	(State) HI	(Zip 96813	Code)	
EMPLOYING ORGANIZATION (Fill LEGISLATIVE INFORMTION SE	TELEPHONE 533-6750			
MAILING ADDRESS (Street) 677 Ala Moana Blvd., Suite 815			FAX 808-599-2606	
(City) Honolulu	(State) HI	(Zip 9681	Code) 3	
DADT II ODGANIZATION				
PART II ORGANIZATION Responsible use of Fireworks Association		TELEPHONE 206-363-7573		
MAILING ADDRESS (Street)			FAX	
16526 Shore Drive NE			206-363-7575	
(City) Lake Forest Park	(State) WA		(Zip Code) 98155-5631	
NAME OF PERSON RESPONSIBLE Jerald E. Farley	FOR PREPARING ORGANIZATION'S EXPE	NDITURES STATEMENT	TELEPHONE 206-363-7573	
MAILING ADDRESS (Street) 16526 Shore Drive NE			FAX 206-363-7575	
(City) Lake Forest Park	(State) WA		(Zip Code) 98155-5631	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
[] Agriculture	[X] Education	[] Human Services	[X] Science, Technology & Economic Development		
[X] Communications & Public Utilities	[X] Government Operations & Finance	[X] Intergovernmental Relations, International Affairs	[X] Tourism & Recreation		
[X] Consumer Protection & Commerce	[X] Hawaiian Affairs	[X] Labor & Employment	[X] Transportation		
[X] Culture, Arts, Historic Preservation	[X] Health	[] Planning, Land & Water Use Management	[] Other: (indicate below)		
[X] Ecology, Energy Environmental Protection	[] Housing	[X] Public Safety & Corrections			
	N OF LOBBYIST				
I hereby cortify that the	្នinfermation fumished above i	is, to the best of my knowledge	correct and complete.		
1-25-05					
	(Signature of Lobbyist)		(Date)		
PART V AUTHORIZATION TO LOBBY					
NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
Jerald E. Farley					
NAME OF ORGANIZATION (if applicable)			LEPHONE		
Responsible Use of Fireworks Association			063-363-7573		
MAILING ADDRESS (Street)			¥X		
16526 Shore Drive NE					
(City)	(State)	(Zip Cod	e)		
Lake Forest Park,	WA ´	98155-5631			
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.					
Jerald E. Farl	ey brall Etz	January January	1, 2005		
(Signat	ture of Authorizing Officer or Person	Represented	(Date)		